

\_\_\_\_\_, an eligible applicant provider that has demonstrated the ability and the capacity to provide quality Adult Education and Literacy Services within Montana and with a clearly defined plan to provide higher quality and/or expanded services to adult education and literacy learners in Montana, does hereby make application for FY13 Adult Education funding.

Each item must be initialed in blue/black ink by the head of the applicant's agency, division, or organization. Initialing each item will confirm agreement and the applicant's willingness to comply with the statement. Please read these assurances carefully. Initial next to each statement and sign and date at the bottom.

\_\_\_\_\_ 1. We understand and agree to the federal requirements as outlined in the Workforce Investment Act of 1998 (Title II—Adult Education and Family Literacy Act: Subtitle A—Adult Education and Literacy Programs), subsequent federal requirements, and state policies for receipt of adult education funding.

\_\_\_\_\_ 2. We understand and will observe the service priorities under the Act; that is, serving those most in need.

\_\_\_\_\_ 3. We understand and accept that each program receiving a grant under this subtitle may not charge any eligible AEFLA participant a fee for instructional services.

\_\_\_\_\_ 4. We understand and accept that funds made available for adult education and literacy activities under this subtitle shall supplement and not supplant other state or local funds expended for adult education and literacy activities.

\_\_\_\_\_ 5. We understand and accept that all funds are allocated for FY13 and must be spent within the fiscal year for which they are approved or allocated to be spent. We understand that the fiscal year for the purposes of this application is July 1, 2012 – June 30, 2013.

\_\_\_\_\_ 6. We understand and accept that not more than 5% of funds secured through this application process may be used to fund administrative expenses unless negotiated with the OPI.

\_\_\_\_\_ 7. We understand and accept that the budget allotted to us by the state in our official grant award letter is our approved budget for the fiscal year and that revisions resulting in a change greater than 10% in any budget line item from the originally approved budget must be approved by the state.

\_\_\_\_\_ 8. We understand that each program receiving a grant under this subtitle must maintain a record of actual expenditures of local, state, and federal funds for activities allowed under this subtitle.

\_\_\_\_\_ 9. We will submit all reports to the OPI in accordance with the guidance provided and on the required due dates.

\_\_\_\_\_ 10. We understand and accept that the program must support the performance goals that the state negotiates with the U.S. Department of Education.

\_\_\_\_\_ 11. We understand and accept that continued funding, and the level of funding for our program, is based on our performance. If we don't show improvement in our performance, we may be subject to reduced or discontinued funding.

\_\_\_\_\_ 12. We understand and accept that all staff development activities will directly relate to program performance improvement. Furthermore, we agree to participate in and support required professional development activities scheduled during the term of this grant and to provide paid professional development time for attendees.

\_\_\_\_\_ 13. We understand and accept that the program will adhere to the state's formal assessment policy. This includes pre and posttesting with the approved instruments (TABE and BEST PLUS). We accept the responsibility to train staff annually in the administration and use of these assessment instruments and the Montana Assessment policy to ensure compliance.

\_\_\_\_\_ 14. We will maintain and use the Montana Management and Accountability System (MABLE), and provide continuous training for appropriate staff in that system to report student characteristics, enrollment, progress and goals.

\_\_\_\_\_ 15. We will operate our program in compliance with the following federal non-discrimination laws:

- Americans with Disabilities Act of 1990
- Section 427 of the General Education Provisions Act
- Title VI and VII of the Civil Rights Act of 1964

\_\_\_\_\_ 16. We will maintain the privacy of all student and staff records in compliance with all state and federal regulations.

\_\_\_\_\_ 17. We will maintain time and effort charts for all services paid with funds from this grant.

\_\_\_\_\_ 18. We will collaborate and create community partnerships with other literacy, educational, and service organizations in our area. We will eliminate, to the best of our ability, any unnecessary duplication of services for Adult Basic Education and Literacy.

\_\_\_\_\_ 19. We will provide state and/or local matching expenditures equal to or greater than the aggregate amount expended during the preceding fiscal year. State and/or local matching will be a minimum of 25 percent of the federal funding per year.

\_\_\_\_\_ 20. We will prepare reports, containing such information as the state Superintendent of Public Instruction may reasonably require, to determine the extent to which funds have been effective in carrying out AEFLA and legislative purposes and project objectives.

\_\_\_\_\_ 21. We assure that the program will:

- a. provide guidance and counseling services;
- b. provide year-round instruction as feasible;
- c. develop effective recruitment and retention strategies; and
- d. provide services at a reasonable cost/benefit.

\_\_\_\_\_ 22. We assure that resources will be available, and a process established, to develop a students' Personal Employment Plan (PEP Talk) and provide transition curriculum when appropriate.

\_\_\_\_\_ 23. We assure incorporation of Montana Adult Basic and Literacy Education Learning Standards into all eligible instructional activities.

\_\_\_\_\_ 24. We assure that the state-approved standards for English for Speakers of Other Languages (ESOL) will be used throughout the duration of the grant.

\_\_\_\_\_ 25. We assure that state-required program data (including students' social security number), will be collected and entered into the state-developed management information system (MABLE). Social security numbers are used for data matches with the Montana Department of Workforce Services, the Montana Office of the Commissioner of Higher Education and the U.S. Department of Education data warehouse.

\_\_\_\_\_ 26. We assure that receipts and expenditures of all funds associated with Adult Education will be documented and accounted for, and available to review as required by the U.S. Department of Education

Name	Title
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\_\_\_\_\_  
Signature (in blue/black ink)

\_\_\_\_\_  
Date

### Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transactions

This certification is required by the Department of Education regulations implementing Executive Order 12549, Debarment and Suspension, 34 CFR Part 85, for all lower tier transactions meeting the threshold and tier requirements stated at Section 85.110.

#### Instructions for Certification

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in

this covered transaction, unless authorized by the department or agency with which this transaction originated.

6. The prospective lower tier participant further agrees by submitting this proposal that it will include the clause titled A Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion-Lower Tier Covered Transactions, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may but is not required to, check the Non procurement List.

8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment

#### Certification

- (1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- (2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

NAME OF APPLICANT	PR/AWARD NUMBER AND/OR PROJECT NAME
PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE	
SIGNATURE (blue ink only)	DATE

ED 80-0014, 9/90 (Replaces GCS-009 (REV.12/88), which is obsolete)

### Certifications Regarding Lobbying; Debarment, Suspension and Other Responsibility Matters; and Drug-Free Workplace Requirements

Applicants shall refer to the regulations cited below to determine the certification to which they are required to attest. Applicants shall also review the instructions for certification included in the regulations before completing this form. Signature of this form provides for compliance with certification requirements under 34 CFR Part 82, "New Restrictions on Lobbying," and 34 CFR Part 85, "Government-wide Debarment and Suspension (Non-procurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Education determines to award the covered transaction, grant, or cooperative agreement.

#### 1. LOBBYING

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 34 CFR Part 8s, for persons entering into a grant or cooperative agreement of \$100,000, as defined at 34 CFR Part 82, Sections 82.105 and 82.110, the applicant certifies that:

- (a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of Congress, or an employee of a Member of Congress in connection with the making or any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;
- (b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form – LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions;
- (c) The undersigned shall require that the language of this certification be included in the award documents for all sub awards at all tiers (including subcontracts) and that all sub recipients shall certify and disclose accordingly.

#### 2. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS

As required by Executive Order 12549, Debarment and Suspension, and implemented at 34 CFR Part 85, for prospective participants in primary covered transactions, as defined at 34 CFR Part 85, Section 85.102 and 85.110-

- A. The applicant certifies that it and its principals:
  - (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
  - (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of

Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statement, or receiving stolen property.

- (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (2)(b) of this certification; and
  - (d) Have not within a three-year period preceding this application had one or more public transaction (Federal, State, or local) terminated for cause or default; or
- B. Where the applicant is unable to certify any of the statements in this certification, he or she shall attach an explanation to this application.

#### 3. DRUG-FREE WORKPLACE (GRANTEES OTHER THAN INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 34 CFR Part 85, Subpart F, for grantees, as defined at 34 CFR Part 85, Sections 85.605 and 85.610 –

- A. The applicant certifies that it will or will continue to provide a drug-free workplace by:
  - (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
  - (b) Establishing an on-going drug-free awareness program to inform employees about:
    - (1) The dangers of drug abuse in the workplace;
    - (2) The grantee's policy of maintaining a drug-free workplace;
    - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
    - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
  - (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
  - (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:
    - (1) Abide by the terms of the statement; and
    - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
  - (e) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to: Director, Grants and Policy and Oversight Staff, U.S. Department of Education, 400 Maryland

Avenue, S.W. (Room 3652, GSA Regional Office Building No. 3), Washington, DC 20202-4248. Notice shall include the identification number(s) of each affected grant;

- (f) Taking one of the following actions, within 30 calendar days or receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted;
- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
  - (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraph (a), (b), (c), (d), (e), and (f).
- B. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, city, county, state, zip code)

<b>Street Address</b>	
<b>City</b>	<b>County</b>
<b>State</b>	<b>Zip Code</b>

- ☐ Check here if there are any workplaces on file that are not identified

**DRUG-FREE WORKPLACE  
(GRANTEES WHO ARE INDIVIDUALS)**

As required by the Drug-Free Workplace Act of 1988, and implemented as 34 CFR Part 85, Subpart F, for grantees, as defined at 34 DFR Part 85, Section 85.605 and 85.610 -

- A. As a condition of the grant, I certify that I will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant; and
- B. If convicted of a criminal drug offense resulting from a violation during the conduct of any grant activity, I will report the convictions, to: Director, Grants and Contracts Services, U.S. Department of Education, 400 Maryland Avenue, S.W. (Room 3124, GSA Regional Office Building No. 3), Washington, DC 20202-4571. Notice shall include the identification number(s) of each affected grant.

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certification.

<b>NAME OF APPLICANT</b>	<b>PR/AWARD NUMBER AND/OR PROJECT NAME</b>
<b>PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE</b>	
<b>SIGNATURE (blue ink only)</b>	<b>DATE</b>

Applicant Name: \_\_\_\_\_

### Instructions for Completing the Applicant background

In this section you must demonstrate your agency/organization's background and history of providing Adult Education and Literacy Services.

**Respond to the following three items for the "Applicant Background" section of your application. Use this page as a cover page for the applicant background section. Be sure to include your agency/organization in the footer of each page of your written response to question 2.**

1. Provide an organizational chart for your agency/organization. (1 pt.)
2. In no more than five pages of 11-point font and 1-inch margins, describe your agency/organization's history as it relates to your effectiveness at providing adult literacy. Please put the letter and title of each section above your response (e.g., (a.) Your agency/organization background followed by your response.)

You must address the following areas when describing your past effectiveness:

- a) **Your agency/organization's background** (3 pts.)
    - how long you have been providing Adult Education and Literacy Services
    - your record/history of providing Adult Education and Literacy Services
  - b) **Your agency's demonstrated effectiveness (please provide examples/data as support)** (5 pts.)
    - your effectiveness at meeting the adult education and literacy needs of your community
    - your effectiveness at providing Adult Education and Literacy Services
    - your effectiveness at meeting the goals and objectives (for organizations that previously had an AEFLA grant, how well were performance measures met or exceeded? For organizations without data, describe how your program will determine effective skill progression.)
  - c) **The qualifications of your key personnel** (2 pts.)
    - the experience and qualifications of your management/administrative personnel
    - the experience and qualifications of your teaching staff
    - the experience and qualifications of other staff members who work with the program
  - d) **The delivery system for your services** (5 pts.)
    - what methods (classroom, distance learning, open enrollment, managed enrollment, etc.) you have used to provide educational services to students
    - what curriculum(s) (GED prep, contextualized learning, transition courses, etc.), and subject matters you have taught as part of your services
3. Complete the table on the following page listing your current collaborations and partnerships with other community organizations. Attach any Memoranda of Understanding or Letters of Agreement. (4 pts.)

Montana FY13 Adult Education

APPLICANT BACKGROUND
COLLABORATIONS and PARTNERSHIPS

Applicant Name:

Complete this table to briefly describe your agency/organization’s current major partnerships/collaborations. Make multiple copies of this table if needed to accommodate all your partnerships/collaborations. Each copy must include your name.

Name of Partner or Collaboration	What do you provide to the partnership or collaboration?	What do the other members provide to the partnership or collaboration?	Formal or Informal Agreement (Attach agreement)

# Montana FY13 Adult Education

## STATEMENT OF NEED

**Applicant Name:** \_\_\_\_\_

### **Instructions for Completing the Needs Assessment**

Use actual data, provided in Appendix D of this application or from other sources if necessary, to support your answers to the following three questions. This data should be used to assess and support the need for additional or expanded services to target populations in the area.

**Use no more than three pages of 11-point font and 1-inch margins. Respond to the following three questions. Use this page as the cover page for your responses to “Needs Assessment.” Be sure to include your agency/organization name in the footer of each page of your response. Please put the number and title of each section above your response**

1. What is the need based on the regional data? Please be specific. (5 pts.)
2. What population will be served with these funds and how is this supported by the data? Please note the priority populations for Montana listed below. (5 pts.)

### **Priority Populations in Montana are as Follows:**

1. Low-income, unemployed, and underemployed;
  2. Rurally isolated;
  3. Currently employed who are not targeted by, or eligible for, educational services under other federally funded programs;
  4. Individuals with multiple barriers to educational enhancement, including individuals with limited English proficiency;
  5. Single parents and displaced homemakers; and
  6. Displaced workers; and individuals with disabilities.
3. Give a brief overview of how you will expand your existing services with these funds to address the statement of need from question one, and serve the population described in question two. You will have a chance to describe these services in detail later in the application, so please limit this response to a general overview. (10 pts)



**Applicant Name:** \_\_\_\_\_

**Instructions for completing the program design.**

When describing your program design, you will need to complete several parts. First, you will answer a set of seven questions, found below. You will also need to complete the table for “Program Locations”

**Use this page as the cover page for the “Program Design” portion of your application.**

**Respond to the following seven questions in no more than 10 pages of 11-point font and 1-inch margins. Be sure to include your agency/organization name in the footer of each page of your response. Please put the number and title of each section above your response.**

**Student Recruitment (5 pts)**

- Describe how you will recruit the target population(s) addressed in your statement of need.

**1. Student Intake and Assessment (10 pts.)**

- Describe the student intake, goal setting, and assessment processes that will be used to ensure that students can successfully participate in the instructional program and meet their goals.
- List the ways in which assessment results will be used to:
  - provide feedback to learners,
  - provide feedback to instructional staff, and
  - provide information to the program/agency leaders.

**2. Instruction and Curriculum (15 pts.)**

- List the focus/content/topics of the instruction you will deliver (ABE, ESL, GED, Bridge, etc.).
- List the main teaching strategies, based on research, that will be used in the classroom.
- Describe the instructional practices, based on research, you will use to address phonemic awareness, phonics, and reading comprehension.
- Describe how you will incorporate advances in technology into your curriculum, including the use of computers, i-pods, smart boards, etc.
- Describe how you will use distance learning.
- Describe how you will use a Bridge program, or provide transition curriculum.

**3. Student Transition (5 pts.)**

- Describe your effectiveness in integration of career pathway instruction.
- Describe how you are using PEP Talk.
- Describe other career pathway curriculum you are using and/or learning activities in real life ensuring students develop skills needed to compete in the workplace or post-secondary education or training.

**4. Support Services (5 pts.)**

- List any agencies and/or institutions that are used to provide support services to learners.
- Describe the process that is used to refer learners to services.

**5. Interagency Collaboration (5 pts.)**

- Describe how you will coordinate with other agencies, organizations, or community partners (such as a Community Management Team or One-Stop Center) in your area to avoid duplication of services and assist learners in achieving their goals.

**6. Quality Data (15 pts.)**

- Describe how you collect, store, and manage student data to ensure that it is reliable and of high quality.
- Describe how data will be used to promote continuous program improvement.

# Montana FY13 Adult Education

## PROGRAM DESIGN

### Class Location Table

**Applicant Name:** \_\_\_\_\_

**Please list your ABE Center and all Satellites where you plan to offer classes funded by this grant. Indicate if this is a currently used location (C) or a proposed new location (N).**

[illegible]

## Montana FY13 Adult Education

### Intensity and Duration Table Staff List and Duties – Qualifications

**Applicant Name:** \_\_\_\_\_

**Instructions for completing Intensity and Duration of Services Table and Staff Duties and Qualifications**

Complete the proposed Intensity and Duration of Services Table on the following page. Use multiple copies of this table as needed to accommodate all classes. Fill out each column as follows to the best of your ability, estimating where needed. Only include proposed classes that will be paid with this grant.

**Please respond to the following question in no more than a 1-page, 11-point font with 1-inch margins. Use this page as a cover page for Intensity and Duration of Services and Staff. Be sure to include the agency/organization name in the Footer.**

1. List your total staff (full and part-time) and their main duties (teacher, counselor, administrator, volunteer, data management, certifications), and years of experience.
2. Full Intensity and Duration table appears on the next page.

# INTENSITY AND DURATION OF SERVICES

**INSTRUCTIONS:** Indicate your organization's/agency's proposed service pattern, including all satellites.

AEFLA Section 231(3)(10) and 231(3)(4)

Program Year:    Begin Date:            End Date:

Site by name and address:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Services offered							
Time offered							

Site by name and address:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Services offered							
Time offered							

Site by name and address:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Services offered							
Time offered							

Site by name and address:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Services offered							
Time offered							

Site by name and address:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Services offered							
Time offered							

**Applicant Name:** \_\_\_\_\_

### **Instructions for Completing Performance Targets:**

#### **Complete the Performance Target estimates.**

You will find in **Appendix B**, descriptions for the National Reporting System; Educational Functioning Level Descriptors; Core Outcome Measures; and Montana ABLE 2012-2013 Performance Projections. These descriptions will help applicants estimate their performance measures, if they do not have previous measures to use as a basis.

1. Please use the tables on the following pages to provide projected performance targets for each applicable program of operation (GAE). Projected Performance Targets are calculated as follows:
  - a. Estimate the total number of students who will have that indicator as their goal.  
(Projected Number)
  - b. Estimate the number of students who will complete that goal within one program year of instruction. (Number who will attain goal)
  - c. Divide the number in (b) by the number in (a) and multiply by 100. This will give you the percentage that is your estimated performance target (percent who will attain the goal).

**Respond to the following question in not more than two pages, 11-point font with 1-inch margins. Use the page as a cover page for the Performance Targets portion of your application. Be sure to include your agency/organization name in the footer.**

2. Give a brief description of how your program's instructional activities will help meet state performance targets.

## PERFORMANCE TARGETS

### General Adult Education (ABE/ASE)

Applicant Name: \_\_\_\_\_

Core Indicator 1* (Unduplicated)	FY13
<b>ABE Beginning Literacy</b> The number and percent of <b>ABE Beginning Literacy</b> learners who will acquire the level of skills needed to complete the educational functioning level.	Projected number _____ # who will attain goal _____ % who will attain goal _____%
<b>ABE Beginning Basic Education</b> The number and percent of <b>ABE Beginning Basic Education</b> learners who will acquire the level of skills needed to complete the educational functioning level.	Projected number _____ # who will attain goal _____ % who will attain goal _____%
<b>ABE Low Intermediate</b> The number and percent of <b>ABE Low Intermediate</b> learners who will acquire the level of skills needed to complete the educational functioning level.	Projected number _____ # who will attain goal _____ % who will attain goal _____%
<b>ABE High Intermediate</b> The number and percent of <b>ABE High Intermediate</b> learners who will acquire the level of skills needed to complete the educational functioning level.	Projected number _____ # who will attain goal _____ % who will attain goal _____%
<b>Low Adult Secondary Education (ASE)</b> The number and percent of <b>ASE Low</b> learners who will acquire the level of skills needed to complete the educational functioning level.	Projected number _____ # who will attain goal _____ % who will attain goal _____%
<b>ASE High</b> The number and percent of <b>ASE High</b> learners who will acquire the level of skills needed to complete the educational functioning level.	Projected number _____ # who will attain goal _____ % who will attain goal _____%

Core Indicator 2 (May be duplicated)	FY13
<b>Entered Employment</b> The number of all adult learners who set the goal of <b>entering employment</b> and the number and percent projected to attain that goal.	Projected number _____ # who will attain goal _____ % who will attain goal _____%
<b>Retained or Improved Employment</b> The number of all adult learners who set the goal of <b>retaining or improving employment</b> and the number and percent projected to attain that goal.	Projected number _____ # who will attain goal _____ % who will attain goal _____%
<b>Placement in Postsecondary Education or Training</b> The number of all adult learners who set the goal of <b>entering postsecondary education or training</b> and the number and percent who are projected to attain that goal.	Projected number _____ # who will attain goal _____ % who will attain goal _____%

Core Indicator 3 (May be duplicated)	FY13
<b>Receipt of a secondary school diploma or GED</b> The number of all adult learners who set the goal of earning a secondary school diploma or GED and the number and percent who are projected to attain that goal.	Projected number _____ # who will attain goal _____ % who will attain goal _____%

## General Adult Education (ESL and Core Indicators)

**Applicant Name:** \_\_\_\_\_

Core Indicator 1* (Unduplicated)	FY13
<b>ESL Beginning Literacy</b> The number and percent of <b>ESL Beginning Literacy</b> learners who will acquire the level of skills needed to complete the educational functioning level.	Projected number _____ # who will attain goal _____ % who will attain goal _____%
<b>ESL Low Beginning</b> The number and percent of <b>ESL Low Beginning</b> learners who will acquire the level of skills needed to complete the educational functioning level.	Projected number _____ # who will attain goal _____ % who will attain goal _____%
<b>ESL High Beginning</b> The number and percent of <b>ESL High Beginning</b> learners who will acquire the level of skills needed to complete the educational functioning level	Projected number _____ # who will attain goal _____ % who will attain goal _____%
<b>ESL Low Intermediate</b> The number and percent of <b>ESL Low Intermediate</b> learners who will acquire the level of skills needed to complete the educational functioning level.	Projected number _____ # who will attain goal _____ % who will attain goal _____%
<b>ESL High Intermediate</b> The number and percent of adult learners <b>ESL High Intermediate</b> learners who will acquire the level of skills needed to complete the educational functioning level.	Projected number _____ # who will attain goal _____ % who will attain goal _____%
<b>ESL Advanced</b> The number and percent of adult learners enrolled in <b>ESL Advanced</b> who will acquire the level of skills needed to complete the educational functioning level.	Projected number _____ # who will attain goal _____ % who will attain goal _____%

Core Indicator 2 (May be duplicated)	FY13
<b>Entered Employment</b> The number of all adult learners who set the goal of <b>entering employment</b> and the number and percent projected to attain that goal.	Projected number _____ # who will attain goal _____ % who will attain goal _____%
<b>Retained or Improved Employment</b> The number of all adult learners who set the goal of <b>retaining or improving employment</b> and the number and percent projected to attain that goal.	Projected number _____ # who will attain goal _____ % who will attain goal _____%
<b>Placement in Postsecondary Education or Training</b> The number of all adult learners who set the goal of <b>entering postsecondary education or training</b> and the number and percent who are projected to attain that goal.	Projected number _____ # who will attain goal _____ % who will attain goal _____%

Core Indicator 3 (May be duplicated)	FY13
<b>Receipt of a secondary school diploma or GED</b> The number of all adult learners who set the goal of earning a secondary school diploma or GED and the number and percent who are projected to attain that goal.	Projected number _____ # who will attain goal _____ % who will attain goal _____%

## BUDGET INFORMATION

### *General Budget Information*

#### **Budget Instructions**

Each applicant is required to submit a general budget summary explanation, employees paid and projected matching funds budget form. Please use this page as a cover page for the budget portion of your application.

If your application is approved, you will be asked to revise your budget(s) to adjust for finalized funding amounts.

This section details the budgeting codes, followed by the forms to be used.

#### **1. Budget Summary Explanation**

Detail the proposed budget allotments in the spaces provided on the Budget Summary Explanation Form. It is not necessary to use all budget categories. Refer to the budget codes for specific descriptions of budget categories. Fill out the table.

#### **2. Projected Matching Funds**



# FUNDING CODES

## Object Codes

- 100 Personal Service Salaries – Salaries. Amounts paid to employees of the school district who are considered to be in positions of a permanent nature or hired temporarily, including personnel substituting for those in permanent positions. This includes gross salary for personal services rendered while on the payroll of the school district.
- 110 Regular Salaries. Full-time, part-time, and prorated portion of the costs for work performed by employees of the school district who are considered to be in positions of a permanent nature. Amounts paid to employees for holidays, sick leave, vacation leave, and personal leave should be included as regular salary. Amounts paid for unused sick or vacation leave upon termination of employment should be coded to object codes 160 or 170, respectively. References: Certified Staff – Title 20 Chapter 4, MCA, School Clerk – Title 20 Chapter 3 MCA, References: Certified Staff – Title 39, MCA, Holiday and Vacation and Sick Leave Pay – Title 2 Chapter 1 and Chapter 18.
- 111 Administrative – Certified (Business Managers/Clerks if duties are considered administrative)
- 112 Professional – Educational (Certified Teaching Staff)
- 113 Professional – Other Certified Staff (Librarians, Counselors, Psychologists, Physical and Speech Therapists)
- 114 Custodial/Maintenance
- 115 Office/Clerical/Technology
- 200 Employee Benefits – Benefits
- 300 Purchased Professional and Technical Services – Contracted services for administrative, professional, educational, technical and cooperative services.
- 400 Purchased Property Services – Utilities, building usage charges, repairs and maintenance services, rent, minor construction.
- 500 Other Purchased Services – Student travel, employee travel, professional development, registrations, communications, printing.
- 600 Supplies – Instructional supplies and materials, textbooks, library materials, software, minor equipment.
- 700 Property – Capital outlay, including major construction and equipment usually greater than \$5,000 (Requires Pre-Approval by the OPI)
- 800 Other Objects – Rare Dues or fees

## **Purpose Categories**

- 10 Instruction – Activities dealing directly with the interaction between teachers and students.
- 20 Support Services –
  - a. Instructional staff – Activities associated with assisting the instructional staff with the content and process of providing learning experiences for students (i.e., improvement of instruction services, designing curriculum).
  - b. Students – Activities designed to assess and improve the well-being of students and to supplement the teaching process. Non instructional paraprofessionals should be recorded here.
- 21 Professional Development – Activities associated with high-quality professional development and training of school system personnel including in-service learning and workshops.
- 22 Administration – Includes support services for general administration, school administrators (i.e., federal program staff at the district office, district facilitators), and business office.
- 33 School and Community Support – Activities concerned with providing community service to students, staff, or other community participants. Activities performed by students that address a given community need and provide for structured opportunities linking tasks to the acquisition of values, skills, or knowledge by participating students.

# BUDGET SUMMARY EXPLANATION

**INSTRUCTIONS:** In the spaces provided, detail proposed budget allotments. It is not necessary to use all budget categories. Refer to the funding codes for specific descriptions of budget categories.

## Total Requested Budget

Budget Category	Federal Grant Share		State Grant Share		Explanation/Detail
	Direct Student Services (At least 95%)	Administrative Services (No more than 5%)			
A. Salaries (100)					List, by name, each person paid a salary from this grant on page 12. Show calculations by "category" here.
Total Salaries					
B. Employee Benefits (200)					List, by name, each person receiving benefits from this grant on page 12. Show calculations by "category" here.
Total Benefits					
Total A+B					
C. Purchased Professional and Technical Services (300)					
D Purchased Property Services (400)					

Budget Category	Federal Grant Share		State Grant Share		Explanation/Detail
	Direct Student Services (At least 95%)	Administrative Services (No more than 5%)			
E. Other Purchases (500)					
F. Travel (500)					<p>_____ Travel for Director/Coordinator/Staff to attend a minimum of two State Adult Education Directors'/Instructor meetings as per state travel eligibility requirements</p> <p>_____ Other travel (e.g., professional development, site visits) – List traveler(s), destination and amount.</p>
G. Supplies, Materials, and Property less than \$5,000 (600)					
H. Other (800)					
I. Total Direct Costs (Lines A through H)					

Budget Category	Federal Grant Share		State Grant Share		Explanation/Detail
	Direct Student Services (At least 95%)	Administrative Services (No more than 5%)			
J. Indirect Cost					_____ % (list the project percentage charged)
K. Property (700) Note: only items with an individual value of \$5,000 or greater are defined here.					
L. TOTAL (Lines I through K)		(this amount must be equal to or less than 5% of total budget)			
M. GRAND TOTAL			The Grand Total must match the budget total from the top of the Budget Summary Explanation page.		

Based on all budget figures and the number of students to be served from the Measurable Goals chart, what is the cost per student?

1. Using federal funds from this project only: \_\_\_\_\_
2. Combined with all other available resources applied to this project: \_\_\_\_\_

\$

\$

## PROJECTED MATCH FUNDING

1. Federal grant amount requested. Federal Funds Awarded  
(For State Office Use Only)



2. Other funding intended to be used in the project. It is a state requirement that applications must include at least a minimum 25 percent match from non-federal funding sources. Note: In-kind program support can be used in fulfilling the 25 percent matching requirement. In-kind support should include a brief statement as to how the dollar value is calculated. Maintenance of effort is required for this grant. Existing providers must match existing (MOE)

Source/In-kind	Dollar Amount	How will other funding be used to support this project? Description defining In-kind match.
2-A.	\$	
2-B.	\$	
2-C.	\$	
2-D.	\$	
2-E.	\$	
2-F.	\$	
<b>TOTALS</b>		
<b>SUBTOTAL (ITEM 2 ONLY)</b>	\$	
<b>TOTAL (ITEMS 1 AND 2)</b>		

# ***APPENDIX A***

- *List of Currently Funded Adult Education Programs in Montana A-1*

February 2012

***MONTANA ADULT BASIC AND LITERACY EDUCATION PROGRAMS***

Anaconda Community Literacy Program 401 Main Street, Anaconda, MT 59711 406-563-6932	Powell County Literacy Program 501 Missouri, Deer Lodge, MT 59722 406-846-2242
Billings School District Lincoln Center 415 North 30 <sup>th</sup> Street, Billings, MT 59101 406-281-5005  Corrections Billings Billings College of Technology	Bozeman School District 404 West Main, Room 226, Bozeman, MT 59715 406-522-6096  Bozeman Pre-Release Bozeman CEM
Butte School District, Webster Complex 1050 South Montana, Butte, MT 59701 406-533-2968	Montana State Prison 500 Conley Lake Road, Deer Lodge, MT 59722 406-846-1320 x 2360
Forsyth School District Adult Education Center, 1093 Main St. Forsyth, MT 59327 406-346-2076	Dawson Community College 300 College Drive, Glendive, MT 59330 406-377-9409  Glendive Corrections Sidney ABE Sidney LVA
Great Falls College of Technology 2100 16 <sup>th</sup> Avenue S., Great Falls, MT 59401 406-771-5108	Literacy Volunteers of America Bitterroot 316 N 3 <sup>rd</sup> Street, Hamilton, MT 59840 406-363-2900  Corvallis Darby Pinesdale Stevensville
Hardin School District 125 N. Cody, Hardin, MT 59034 406-665-9391  Crow Agency	Havre HRDC District #4 2229 5 <sup>th</sup> Avenue, Havre, MT 59501 406-265-6743
Helena School District Adult Learning Center 815 Front Street, Helena, MT 59601 406-324-2119  Boulder Center for Mental Health Elkhorn Treatment Center Helena Pre-Release Center Riverside Corrections Townsend	Flathead Valley Community College 777 Grandview Drive, Kalispell, MT 59901 406-756-3884 Columbia Falls  Eureka Human Resources Libby



Chief Dull Knife College 1 College Drive, Lame Deer, MT 59043 406-477-6215 x 128	Fergus High School, Community Education 773 Airport Road, Lewistown, MT 59457 406-535-9022 Roundup
Community Health Partners 112 West Lewis, Livingston, MT 59047 406-823-6356	Miles Community College 2715 Dickinson, Miles City, MT 59301 406-874-6211
Dickinson Lifelong Learning Center 310 South Curtis, Missoula, MT 59801 406-542-4015  Seeley Lake Superior Salcido Center Frenchtown City Life Community Center	Salish Kootenai College 58138 Highway 93, Pablo, MT 59855 406-275-4790

# ***APPENDIX B***

- *National Reporting System*
  - *Additional Information*    *B-1*
  - *Educational Functioning Level (EFL) Descriptors Table*    *B-2*
  - *NRS Core Outcome Measures*    *B-3*
  - *Montana ABLE Performance Projectors*    *B-4*

# NATIONAL REPORTING SYSTEM

The following National Reporting System (NRS) information is intended to supplement the information provided in the actual FY2010 Region III application. Additionally, the information provided in the Educational Functioning Levels table will assist applicants in their response to various parts of the application.

For more information on the NRS, visit their website at [www.nrsweb.org](http://www.nrsweb.org).

The Adult Education and Family Literacy Act states that the core indicators of performance are:

- Demonstrated improvements in literacy skill levels in reading, writing and speaking the English language, numeracy, problem-solving, English language acquisition, and other literacy skills.
- Placement in, retention in, or completion of post-secondary education, training, unsubsidized employment or career advancement.
- Receipt of a secondary school diploma or its recognized equivalent.

The NRS expands on the core indicators of performance and lays out a set of core measures. These core measures are broken into the following three categories:

- **Outcome measures** (learner outcomes for the core indicators in the AEFLA) include:
  - educational gain(s) (improvement in Educational Functioning Level),
  - entered employment,
  - retained employment,
  - receipt of secondary school diploma or general education development (GED) and
  - placement in postsecondary education or training
- **Descriptive measures** include:
  - student demographics,
  - reasons for attending (student goals) and
  - student status
- **Participation measures** include:
  - contact hours received and
  - type of enrollment

Of the core measures defined by the NRS, student *outcome measures* are the central component of the NRS. The five outcome measures were selected to address the requirements for core indicators of performance in the AEFLA. The most important of these measures is “educational gain,” which is considered a key outcome in the NRS and is a critical indicator of how well Adult Education programs fulfill their primary mandate of providing an educational literacy program. Educational gain is measured by the Educational Functioning Levels (EFLs), which are described in more detail in the attached table.

The following passage from the NRS guidelines provides more detail about educational gain and the EFLs:

*Educational gain, a key outcome in the NRS, provides a measure of student literacy gains resulting from instruction. This measure applies to all students in the program (except pre designated “work-based project learners,” which is described below under “Secondary Measures”). To determine this measure, local programs assess students on intake to determine their educational functioning level [EFL]. There are four levels for adult basic education (ABE), two for adult secondary education (ASE), and six levels of ESL. Each level describes a set of skills and competencies that students entering at that level can do in the areas of reading, writing, numeracy, speaking, listening, and functional and workplace areas. Using these descriptors as guidelines, programs determine the appropriate initial level at which to place students using a standardized assessment procedure (i.e., a test or a standardized performance-based assessment). The program decides the skill areas in which to assess the student based on the student’s instructional needs and goals.*

*After a predetermined amount of instruction or time period determined by each State, the program conducts follow-up assessments of students in the same skill areas and uses the test scores aligned to the educational functioning levels to determine whether the students have advanced one or more levels or are progressing within the same level. The State has discretion to establish the standardized student assessment method used within the State, as well as procedures for progress assessment, and must develop a written statewide assessment policy describing assessments and procedures for approval from DAEL. All assessments and procedures must conform to standard psychometric criteria for validity and reliability as defined by DAEL. Upon DAEL approval, States may also use additional educational levels and skill area descriptors, as long as they are compatible with NRS levels and skills.*

*The remaining core outcome measures are follow-up measures that are reported some time after the student leaves the program. However, the follow-up measures apply only to students who enter the program with goals related to the measures. For unemployed students who enter the program with a goal of obtaining employment, there are two follow-up measures: entered employment (whether the student obtained a job by the end of the first quarter after leaving) and retained employment (whether the student still has the job in the third quarter after exit). This measure also applies to employed students who have a goal of improved or retained employment. For students whose goal is to advance to further education or training, there is a measure of entry into another such program. For students who entered with a goal of obtaining a secondary school diploma or GED, there is a measure of whether the student obtained the credential.*

In summary, completion of, or progress within, an EFL is determined by pre-testing and progress-testing a learner with a standardized assessment tool and comparing the results. In Montana, the approved assessment tools are the Test of Adult Basic Education (TABE) for general Adult Education students and the BEST Plus for ESL students. The NRS levels provide standardized assessment benchmarks which allow program staff to place learners into a particular EFL according to test scores from the TABE or BEST Plus. Using the NRS benchmarks, program staff can determine when learners have made progress within a level, completed a level, and are ready to move to the next level.